PTO/SB/17 (04-07)

Date April 24, 2007

| Effect | tive on 12/08/20 | | | | Co | mplete if Knov | vn | |
|--|--|--|-------------------------------|---|---------------------------------------|------------------------------|---------------------------------------|--|
| pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | Application Number 09/22 | | 222,336 | | |
| FEE TR | ANS | MITTAL | Lſ | Filing Date | | ecember 28, 19 | 98 | |
| For | r FY 20 | 007 | | First Named Inv | | ory | | |
| | | | <u> </u> | Examiner Name | | etta | | |
| Applicant claims small | entity status | . See 37 CFR 1.27 | | Art Unit | | 22 | | |
| TOTAL AMOUNT OF PAY | MENT (\$) | 1500 | | Attorney Docke | | 967/5 | | |
| METHOD OF PAYMEN | T (check all | that apply) | | | | | | |
| Check Credit (| Card N | Money Order | None | Other (t | please identii | fv)* | | |
| Deposit Account D | | - | | _ | | : Brown Rudn | iak | |
| | | account, the Director i | | | | ` | IICK | |
| Charge fee(s) | | | lo no. | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | - L toc | | | | cept for the filing | |
| under 37 CFF | R 1.16 and 1. | | | · · · · · | it any overpa | • | | |
| WARNING: Information on this information and authorization | s form may be | come public. Credit ca | ard info | rmation should n | ot be includ | ed on this form. P | rovide credit card | |
| FEE CALCULATION | OHF TO LUCE. | | | | | | | |
| | COLL AND I | TYANNIATION EE | | | | | | |
| 1. BASIC FILING, SEAF | FILING F | | | CH FEES | EXAMIN | IATION FEES | | |
| Application Type | | imall Entity | | Small Entity | | Small Entity | Fees Paid (\$ | |
| | 300 | | Fee (\$) | | Fee (\$) | | F669 Faid (y | |
| Utility Design | | | 500 | 250 | 200 | 100 | | |
| Design | 200 | | 100 | 50 | 130 | 65 | | |
| Plant | 200 | | 300 | 150 | 160 | 80 | | |
| Reissue | 300 | | 500 | 250 | 600 | 300 | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEE Fee Description | ES | | | | | Fee (\$) | Small Entity Fee (\$) | |
| Each claim over 20 (i | including R | eissues) | | | | 50 | 25 | |
| Each independent cla | im over 3 (i | | s) | | | 200 | 100 | |
| Multiple dependent c | | _ | | | | 360 | 180 | |
| Total Claims | Extra Claim | | | Paid (\$) | | | ependent Claims | |
| | | _ x= | · | | | <u>Fee (\$)</u> | Fee Paid (\$) | |
| - 20 or HP = | ' claims naid fo | r if greater than 20. | | | | | | |
| | l claims paid fo Extra Claim | | Fee | Paid (\$) | | | | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = | Extra Claim | ns <u>Fee (\$)</u> x= | : | <u>Paid (\$)</u> | | | | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep | Extra Claim | ns <u>Fee (\$)</u> x= | : | Paid (\$) | | | | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep 3. APPLICATION SIZE | Extra Claim pendent claims FEE | ns Fee (\$) x = s paid for, if greater than | 1 3. | | electronica | ally filed seque | nce or computer | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep | pendent claims FEE I drawings e | ns Fee (\$) x = s paid for, if greater than exceed 100 sheets of | of pape | er (excluding e | | | | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep 3. APPLICATION SIZE If the specification and listings under 37 Cl sheets or fraction th | pendent claims FEE I drawings e FR 1.52(e)) hereof. See | rs paid for, if greater than exceed 100 sheets on the application size 35 U.S.C. 41(a)(1) | of pape ize fee | per (excluding e due is \$250 (\$ and 37 CFR 1.1 | \$125 for si 16(s). | mall entity) for | each additional | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep. 3. APPLICATION SIZE If the specification and listings under 37 Cl sheets or fraction th Total Sheets | pendent claims FEE I drawings e FR 1.52(e)) | rs and for, if greater than exceed 100 sheets of the application sizes 35 U.S.C. 41(a)(1) the second sizes of the application sizes of the applica | of papoize fee | per (excluding e e due is \$250 (\$ and 37 CFR 1.1 h additional 50 c | \$125 for si 16(s). or fraction | mall entity) for thereof Fee | each additional | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep. 3. APPLICATION SIZE If the specification and listings under 37 Cl sheets or fraction th Total Sheets - 100 = | pendent claims FEE I drawings e FR 1.52(e)) hereof. See | rs paid for, if greater than exceed 100 sheets on the application size 35 U.S.C. 41(a)(1) | of papoize fee | per (excluding e due is \$250 (\$ and 37 CFR 1.1 | \$125 for si 16(s). or fraction | mall entity) for thereof Fee | (\$) Fee Paid | |
| - 20 or HP = HP = highest number of total Indep. Claims - 3 or HP = HP = highest number of indep. 3. APPLICATION SIZE If the specification and listings under 37 Cl sheets or fraction th Total Sheets | pendent claims FEE I drawings e FR 1.52(e)) hereof. See Extra Shee | respect to the series of the s | of pape ize fee l)(G) a | per (excluding end is \$250 (\$250 and 37 CFR 1.1 and additional 50 control of the country to a very series of the country to a | \$125 for si 16(s). or fraction | mall entity) for thereof Fee | each additional 5 | |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) Michael Shanahan

PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| MAY 0 1 2007 Dunder th | ne Paperwork Reduction Act of 1995, no persons are required to re- |
| (2) | Application Nu |

spond to a collection of information unless it displays a valid OMB control number. mber 09/222,336 **TRANSMITTAL** Filing Date December 28, 1998

FORM

(to be used for all correspondence after initial filing)

First Named Inventor Story Art Unit 3622 **Examiner Name** Retta Attorney Docket Number

25967/5

| ENCLOSURES (Check all that apply) Fee Transmittal Form | Total Number of | of Pages in This Submission | | Attorney Docket Number | 25967/5 | | | | |
|--|--|--|------|--|-----------|--------|---|--|--|
| Fee Transmittal Form Fee Attached Licensing-related Papers Appeal Communication to Board of Appeals and Interferences Appeal Notice, Brief, Reply Brief) Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Express Abandonment Request Information Disclosure Statement Cop. Number of CD(s) Landscape Table on CD Remarks SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Brown Rudnick Signature Printed name Michael Shanahan | ENCLOSURES (Check all that apply) | | | | | | | | |
| Firm Name Brown Rudnick Signature Printed name Michael Shanahan | Amendm Amendm A Extensio Express Informati Certified Docume Reply to Incomple | ree Attached nent/Reply After Final Affidavits/declaration(s) In of Time Request Abandonment Request Ion Disclosure Statement Copy of Priority Int(s) Missing Parts/ Pete Application Reply to Missing Parts | | Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocal Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on 6 | | | Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): | | |
| Firm Name Brown Rudnick Signature Printed name Michael Shanahan | CIONATURE OF ARRUSANT ATTORNEY OR A CENT | | | | | | | | |
| Brown Rudnick Signature Printed name Michael Shanahan | Firm Name | JIGNA | TORE | OF APPLICANT, ATT | ORNE 1, C | JK AG | ENI | | |
| Printed name Michael Shanahan | | Brown Rudnick | 1 | | | | | | |
| Michael Shanahan | | Wheel A | Ju. | ~ | | | | | |
| Date April 24, 2007 Reg. No. 43,914 | Printed name | Michael Shanahan | | | | | | | |
| | Date | April 24, 2007 | | | Reg. No. | 43,914 | 1 | | |

| CERTIFICATE OF TRANSMISSION/MAILING | | | | | | | | | |
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| | rrespondence is being facsimile transmitted to the USPTO or depos lass mail in an envelope addressed to: Commissioner for Patents, F | | | | | | | | |
| Signature | Mul Ph | | | | | | | | |
| Typed or printed name | MICHEL SHNAHN | Date | T | 24 | 67 | | | | |

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